

STUDENT PRE ENROLMENT APPLICATION FORM

Welcome to the first stage of the College of Neuro-Training enrolment process.

Our aim is to provide you with the confidence and the tools to forge a new career as a professional practitioner and be able to effect positive change in people's lives.

To do that successfully we need to know a little bit more about you. Please take the time to read and complete the enclosed documentation. Contact your campus nearest trainer if you have any questions or concerns.

Complete this pre-enrolment application as an e-doc, attach and send via email to your campus trainer. Once this information has been received you will be contacted for a personal interview.

Our programs offer inspiration and passion as well as comprehensive understanding of the philosophy and techniques of Kinesiology and Solution Oriented Neuro-Training. We want to ensure that your experience with us is positive, educational and fun.
College of Neuro-Training Administration

STUDENT INFORMATION					
Student Name:					
Address:					
	Suburb:		State:		Postcode:
Tel:	(H)		(W)		Mobile:
Email:					
Course Title:					
Campus					

To enable the College to provide service(s) which meets the needs of the student, please answer the following questions:-
1. Where did you hear about the College of Neuro-Training? <input type="checkbox"/> Internet <input type="checkbox"/> Friend <input type="checkbox"/> Advertisement <input type="checkbox"/> Information Seminar <input type="checkbox"/> Other:
2. Did you find the information you required for your course easy to locate on our website? Yes: <input type="checkbox"/> No: <input type="checkbox"/> Comments (if any):
3. What outcomes do you hope to achieve from this course?
4. What would you say is your purpose for wanting to take this course with the College of Neuro-Training?

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5. What is your understanding of the purpose of this course with the College of Neuro-Training?
6. How does this course serve you and your purpose?
7. Do you think there is a match between your purpose and the purpose of the course with the College of Neuro-Training?
8. What would be your major reservation that may possibly prevent you from attaining your purpose?
9. What support would you like from the College to assist you in achieving your outcomes?
10. Please write a (short essay) on your philosophy of life.
11. Please describe your ideas and thoughts on what it means to you to be a better person and how you think you may go about that.
12. Is there any reason why you may have difficulty finishing the course / or any scheduled assignments? Such as life challenges, learning challenges, health, finances, organizational skills?
13. Have you required extra support in any previous course? If so what kind of support did you require?
14. Would you say that you have good organizational skills in relation to self study?
15. Can you study independently easily?
16. Would you consider yourself a confident learner?
17. If you are studying to be a practitioner, what type of practitioner would you imagine yourself being using Neuro-Training and Kinesiology?
18. Please provide the names and contact numbers of three personal referees i) ii) iii)

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19. Please insert your signature (or sign and pdf this doc), below to validate that you have read and understood the Student Course Guide,
 Student Handbook,
 Student Assessment Guidelines
 Student Agreement Form
 Study Plan
 Student Payment Plan (if appropriate)

Students Signature:

NB: Please complete resave and email to your campus trainer before your pre enrolment interview

Please CC a copy to the college administration.

Allow 14 days for processing. info@collegeofneuro-training.edu.au

Campus Trainer- Use Initial contact date: _/_ _/_	Comments:
Date Received: _/_ _/_	
Interview Date: _/_ _/_	
Interview Date Confirmed at Campus: _/_ _/_	